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| Fill in this information to identify your case: | | |
|---|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | - | |
| Case number (if known) | _ Chapter you are filing under: | |
| | ☐ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ■ Chapter 13 | Check if this an amended filing |

B 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| 1: Identify Yoursel | lf | |
|--|--|--|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| Your full name | | |
| | · · · · · · · · · · · · · · · · · · · | |
| picture identification (in example, your driver's | for | First name |
| license or passport). | Middle name | Middle name |
| Bring your picture identification to your meeting with the trust | East name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| | | |
| Include your married of maiden names. | or | |
| your Social Security number or federal Individual Taxpayer | , xxx-xx-3477 | |
| | Your full name Write the name that is your government-issupicture identification (example, your driver's license or passport). Bring your picture identification to your meeting with the trust. All other names you used in the last 8 yell Include your married maiden names. Only the last 4 digits your Social Security number or federal Individual Taxpayer Identification number. | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. Knight Last name and Suffix (Sr., Jr., II, III) All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number |

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Case number (if known) Debtor 1 Margie Knight

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|---|---|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | ■ I have not used any business name or EINs. | ☐ I have not used any business name or EINs. |
| | Include trade names and doing business as names | Business name(s) | Business name(s) |
| | | EINs | EINs |
| 5. | Where you live | 4400 N.B. J. O. | If Debtor 2 lives at a different address: |
| | | 4100 N Park St. Westmont, IL 60559 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code |
| | | DuPage County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing this district to file for | Check one: | Check one: |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | |

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Case number (if known) Debtor 1 Margie Knight

| ar | Tell the Court About | Your B | ankruptcy Ca | ise | | | | |
|------------|---|---------------|----------------|--------------------------------------|--|---|--|--|
| 7. | The chapter of the Bankruptcy Code you are | Chec (Forn | | | of each, see Notice Required by page 1 and check the appropria | 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy te box. | | |
| | choosing to file under | ☐ Chapter 7 | | | | | | |
| | | □с | hapter 11 | | | | | |
| | | □с | hapter 12 | | | | | |
| | | ■ C | hapter 13 | | | | | |
| | | | | | | | | |
| 3. | How you will pay the fee | • | about how yo | ou may pay. Typ attorney is subr | ically, if you are paying the fee yo | ck with the clerk's office in your local court for more details burself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with | | |
| | | | | | callments. If you choose this options (Official Form 103A). | on, sign and attach the Application for Individuals to Pay | | |
| | | | but is not req | uired to, waive y | your fee, and may do so only if yo | n only if you are filing for Chapter 7. By law, a judge may, our income is less than 150% of the official poverty line fee in installments). If you choose this option, you must fill | | |
| | | | | | | Official Form 103B) and file it with your petition. | | |
|) . | Have you filed for bankruptcy within the | ■ No | D. | | | | | |
| | last 8 years? | □ Ye | es. | | | | | |
| | | | District | | When | Case number | | |
| | | | District | | When | Case number | | |
| | | | District | | When | Case number | | |
| 10. | Are any bankruptcy cases pending or being | ■ No |) | | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | □ Y€ | 9S. | | | | | |
| | | | Debtor | | | Relationship to you | | |
| | | | District | | When | Case number, if known | | |
| | | | Debtor | | | Relationship to you | | |
| | | | District | | When | Case number, if known | | |
| 11. | Do you rent your residence? | ■ No | Go to I | ine 12. | | | | |
| | residence: | □ Ye | es. Has yo | our landlord obta | ined an eviction judgment agains | st you and do you want to stay in your residence? | | |
| | | | | No. Go to line | 12. | | | |
| | | | | Yes. Fill out Initial bankruptcy pet | | Judgment Against You (Form 101A) and file it with this | | |
| | | | | | | | | |

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| Deb | otor 1 Margie Knight | | Case number (if known) | | | | | |
|-----|---|-----------------------|---|--|--|--|--|--|
| | | | | | | | | |
| Par | t 3: Report About Any Bu | sinesses | You Own as a Sole Proprietor | | | | | |
| 12 | Are you a sole proprietor | | · | | | | | |
| 12. | of any full- or part-time business? | ■ No. | Go to Part 4. | | | | | |
| | | ☐ Yes. | Name and location of business | | | | | |
| | A sole proprietorship is a | | | | | | | |
| | business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name of business, if any | | | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Number, Street, City, State & ZIP Code | | | | | |
| | it to this petition. | | Check the appropriate box to describe your business: | | | | | |
| | · | | Health Care Business (as defined in 11 U.S.C. § 101(27A)) | | | | | |
| | | | ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) | | | | | |
| | | | ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A)) | | | | | |
| | | | Commodity Broker (as defined in 11 U.S.C. § 101(6)) | | | | | |
| | | | ☐ None of the above | | | | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadline operation | If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedu in 11 U.S.C. 1116(1)(B). | | | | | |
| | For a definition of small | ■ No. | I am not filing under Chapter 11. | | | | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. | | | | | |
| | | ☐ Yes. | I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code | | | | | |
| Par | t 4: Report if You Own or | Have An | y Hazardous Property or Any Property That Needs Immediate Attention | | | | | |
| 14. | Do you own or have any | ■ No. | | | | | | |
| | property that poses or is alleged to pose a threat | ☐ Yes. | | | | | | |
| | of imminent and identifiable hazard to | | What is the hazard? | | | | | |
| | public health or safety? Or do you own any | | | | | | | |
| | property that needs immediate attention? | | If immediate attention is needed, why is it needed? | | | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is the property? | | | | | |
| | a.gom ropano. | | Number Street City State 9 7in Code | | | | | |

Page 5 of 50 Document Case number (if known) Debtor 1 Margie Knight

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- I am not required to receive a briefing about credit counseling because of:
 - Incapacity. I have a mental illness or a

mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes

me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active П military duty in a military

combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

Incapacity. I have a mental illness or a mental deficiency that makes me incapable

of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing

in person, by phone, or through the internet, even after I reasonably tried

to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| Answer These Questions for Reporting Purposes 16. What kind of debts do you have? 16. What kind of debts do you have? 16. Are your debts primarily to ansumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by sindividual primarily for a personal. family, or household purpose." 16. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. 17. Are your filling under Chapter 7. Bo to line 18. 18. No. Go to line 17. 19. Co state the type of debts you once that are not consumer debts or business debts 19. Ves. Go to line 17. 19. Lam not filling under Chapter 7. Go to line 18. 19. Lam tifling under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses be available for with destribution to unsecured creditors? 19. No. 19. How many Creditors do you assimate that you assess to be worth? 19. How much do you estimate that you assess to be worth? 19. How much do you estimate that you assess to be worth? 19. How much do you estimate that you insured to the young assess to be worth? 19. How much do you estimate your liabilities to solve you assess to be worth? 19. How much do you estimate your liabilities to you solve you assess to be worth? 19. How much do you estimate your liabilities to you solve you assess to be worth? 20. How much do you estimate your liabilities to you solve you assess to be worth? 21. How chosen to file under Chapter 7. In yourse that I may proceed, if aligible, under Chapter 7. In your your your your your your young your your your young your young your young your your young your young your young your, your young your young young your, your young your, young your, young your young your, young | Deb | tor 1 Margie Knight | | Docum | | imber (if known) |
|--|------|---------------------------|------------------------|---|---|--|
| No. Go to line 16b. Yes. Go to line 17. Yes. Go to line 18. Yes. Go to line 18. Yes. Go to line 18. Yes. Yes. Go to line 18. Yes. | Part | 6: Answer These Questi | ions for Re | porting Purposes | | |
| Ves. Go to line 17. | 16. | | 16a. | | | defined in 11 U.S.C. § 101(8) as "incurred by an |
| 16b. | | | | ☐ No. Go to line 16b. | | |
| money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. | | | | ■ Yes. Go to line 17. | | |
| Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts | | | 16b. | | | |
| 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filling under Chapter 7. Go to line 18. | | | | ☐ No. Go to line 16c. | | |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? 18. How many Creditors do you estimate that you owe? 19. How much do you estimate that you westimate that you owe? 19. How much do you estimate your assets to be worth? 19. So, 0001 - \$100,000 \$0.0001 - \$100,000 \$10,000,001 - \$10 million \$50,000,001 - \$10 million \$50,0001 - \$100,000 \$10,000,001 - \$50 million \$500,0001 - \$10 million \$500,0001 - \$100,000,001 - \$50 million \$500,0001 - \$100,000,001 - \$500 million \$100,000,001 - \$500 mil | | | | ☐ Yes. Go to line 17. | | |
| Do you estimate that after any exempt property is excluded and administrative appearses are paid that funds will be available to distribute to unsecured creditors? No | | | 16c. | State the type of debts you | u owe that are not consumer debts or bu | siness debts |
| expenses are paid that funds will be available to distribute to unsecured creditors? No | 17. | | ■ No. | I am not filing under Chapt | ter 7. Go to line 18. | |
| administrative expenses are paid that funds will be available for distribution to unsecured creditors? 18. How many Creditors do you estimate that you we? 19. How much do you estimate that you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. So,0,001 - \$100,000 | | after any exempt | ☐ Yes. | | | |
| 18. How many Creditors do you estimate that you owe? | | | | □ No | | |
| 18. How much do you estimate your assets to be worth? \$50,000 \$50,000 \$1,000,000 \$50,000 \$10,000,000 \$50,000 \$10,000,000 \$10,000 \$10,000,000 \$10,000 \$ | | | | □Yes | | |
| you estimate that you owe? 50.99 | | distribution to unsecured | | | | |
| you estimate that you owe? 50.99 | 18. | How many Creditors do | 1 _40 | | □ 1.000-5.000 | □ 25.001-50.000 |
| 19. How much do you estimate your assets to be worth? \$0 - \$50,000 | | - | | | 5001-10,000 | |
| 19. How much do you estimate your assets to be worth? \$0 - \$50,000 | | owe: | □ 100-19 | 99 | □ 10,001-25,000 | ☐ More than100,000 |
| estimate your assets to be worth? \$50,001 - \$100,000 | | | 200-99 | 99 | | |
| be worth? \$50,001 - \$10,000,001 - \$10 million \$50,000,001 - \$10 million \$10,000,000,001 - \$10 million \$50,000,000,001 - \$10 million \$500,000,001 - \$10 million \$10,000,000 - \$10 million \$10,000,000 - \$10 million \$10,000,000,001 - | 19. | | □ \$0 - \$5 | 50,000 | □ \$1,000,001 - \$10 million | ☐ \$500,000,001 - \$1 billion |
| \$100,001 - \$500,000 \$500,000,001 - \$10 million \$50,000,001,001 - \$50 million \$500,000,001 - \$50 million \$500,000,001 - \$50 million \$500,000,001 - \$10 million \$500,000,001 - \$10 million \$500,000,001 - \$10 million \$500,000,001 - \$10 million \$100,001 - \$10 million \$100,000,001 - \$10 million \$10,000,001 - \$10 million \$100,000,001 - \$100 million \$100,000,001 - \$10 million \$100,000,001 - \$10 million \$100,000,001 - \$100 million | | - | | | | |
| 20. How much do you estimate your liabilities to be? \$50,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000,001 \$10,000,001 \$10,000,001 \$10,000,001 \$10,000,000,001 \$10,000,000,001 \$10,000,000,001 \$10,000,000,001 \$10,000,000,001 \$10,000,000,001 \$10,000,000,001 \$10,000,000,001 \$10,000,000,001 \$10,000,000,001 \$10,000,000,001 \$10,000,000,001 \$10,000,000,001 \$10,000,000,001 \$10,000,000,001 \$10,000,000 \$10,000,001 \$10,000,001 \$10,000,000,001 \$10,000,000,001 \$10,0 | | 30 1101111 | | | | |
| estimate your liabilities to be? \$50,001 - \$100,000 | | | □ \$500,0 | 01 - \$1 million | □ \$100,000,001 - \$500 million | ☐ More than \$50 billion |
| For you Sign Below Sign Be | 20. | | □ \$0 - \$5 | 50,000 | □ \$1,000,001 - \$10 million | ☐ \$500,000,001 - \$1 billion |
| \$100,001 - \$500,000 \$500,000 - \$100,000,001 - \$100 million \$100,000,001 - \$500 million \$100,000,001 - \$500 million More than \$50 billion For you | | | \$50,00 | 01 - \$100,000 | | |
| For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Is/ Margie Knight Margie Knight Signature of Debtor 2 Executed on February 15, 2016 Executed on | | | | | | |
| I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Is/ Margie Knight Margie Knight Signature of Debtor 2 Executed on February 15, 2016 Executed on | | | □ \$500,0 | 001 - \$1 million | □ \$100,000,001 - \$500 million | ☐ More than \$50 billion |
| If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Is/s/ Margie Knight Signature of Debtor 2 Signature of Debtor 1 Executed on February 15, 2016 Executed on | Part | 7: Sign Below | | | | |
| United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Is/ Margie Knight Margie Knight Signature of Debtor 2 Executed on February 15, 2016 Executed on | For | you | I have exa | amined this petition, and I o | leclare under penalty of perjury that the i | nformation provided is true and correct. |
| document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. //s/ Margie Knight Margie Knight Signature of Debtor 2 Signature of Debtor 1 Executed on February 15, 2016 Executed on | | | | | | |
| I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Margie Knight Margie Knight Signature of Debtor 2 Signature of Debtor 1 Executed on February 15, 2016 Executed on | | | | | | |
| bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Margie Knight Margie Knight Signature of Debtor 2 Signature of Debtor 1 Executed on February 15, 2016 Executed on | | | I request | relief in accordance with the | e chapter of title 11, United States Code | , specified in this petition. |
| Margie Knight Signature of Debtor 2 Signature of Debtor 1 Executed on February 15, 2016 Executed on | | | bankrupto 1519, and | y case can result in fines u l 3571. | | |
| | | | Margie I | Knight | Signature of D | ebtor 2 |
| | | | Executed | | Executed on | MM / DD / YYYY |

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Debtor 1 Margie Knight Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Mehul D. Desai | Date | February 15, 2016 |
|--|---------------|----------------------------------|
| Signature of Attorney for Debtor | | MM / DD / YYYY |
| Mehul D. Desai Printed name | | |
| Swanson & Desai, LLC | | |
| Firm name | | |
| 670 W Hubbard | | |
| Suite 202 | | |
| Chicago, IL 60654 | | |
| Number, Street, City, State & ZIP Code | | |
| Contact phone 312-666-7882 | Email address | kc@chicagobankruptcyattorney.com |
| 6296214 | | |
| Bar number & State | | |

| | | DUCUIII | TIL FAUCOUISU | |
|--------------------|--------------------------|-------------------|---------------|--|
| ill in this info | rmation to identify your | case: | | |
| Debtor 1 | Margie Knight | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| Spouse if, filing) | First Name | Middle Name | Last Name | |
| Jnited States B | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Pai | t 1: Summarize Your Assets | | |
|-----|--|-------------|-------------------------------|
| | | Your as | ssets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 70,648.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 5,420.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 76,068.00 |
| Par | t 2: Summarize Your Liabilities | | |
| | | | abilities t you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 92,293.93 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 2,131.20 |
| | Your total liabilities | \$ | 94,425.19 |
| Par | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 3,672.80 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 3,574.0 |
| Par | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with yo | ur other so | chedules. |
| 7. | ■ Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a bousehold purpose "11 LLS C & 101(8). Fill out lines 8-90 for statistical purposes 28 LLS C & 159 | | |

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

☐ Check if this is an amended filing

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Page 9 of 50 Case number (if known) Debtor 1 Margie Knight

| 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | \$ | 4,359.40 |
|---|----|----------|
|---|----|----------|

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total claim | 1 |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

Case 16-04729 Doc 1 Filed 02/15/16 Entered 02/15/16 17:25:54 Desc Main Document Page 10 of 50 Fill in this information to identify your case and this filing: Debtor 1 Margie Knight Middle Name Last Name First Name Debtor 2 First Name Middle Name Last Name (Spouse, if filing) United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? ☐ No. Go to Part 2. Yes. Where is the property? 1.1 What is the property? Check all that apply. 2981 Bonaventure Circle Unit 101 ☐ Single-family home Do not deduct secured claims or exemptions. Put the Street address, if available, or other description amount of any secured claims on Schedule D: ☐ Duplex or multi-unit building Creditors Who Have Claims Secured by Property. Condominium or cooperative ■ Manufactured or mobile home Current value of the Current value of the **Palm Harbor** FL 34684-0000 entire property? portion you own? ☐ Land City \$70,648.00 \$70,648.00 State ZIP Code Investment property ☐ Timeshare ☐ Other Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or Who has an interest in the property? Check a life estate), if known. Fee simple Debtor 1 only **Pinellas** ☐ Debtor 2 only County ☐ Debtor 1 and Debtor 2 only Check if this is community property At least one of the debtors and another (see instructions) Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for \$70,648.00 pages you have attached for Part 1. Write that number here.......>> **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that

someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

■ No

☐ Yes

Official Form 106A/B Schedule A/B: Property page 1

| D | ebtor 1 | Case 16- | | Doc 1 | Filed 02/15/16 Document | Entered 02/15/16 17:2 Page 11 of 50 Case number | | Desc Main |
|----|---------------|--|---------------|-----------------|--|---|-------------|---|
| | | | | ATVs and | other regressional vehi | cles, other vehicles, and accesso | , , | |
| | | | | | | nowmobiles, motorcycle accessorie | | |
| | ■ No | | | | | | | |
| | ☐ Yes | | | | | | | |
| | | | | | | | | |
| 5 | Add the | dollar value of | the portion | on vou own f | or all of vour entries for | rom Part 2, including any entries | for | |
| | | | | | | | | \$0.00 |
| Pa | art 3: Des | scribe Your Perso | nal and Ho | usehold Items | | | | |
| D | o you ow | vn or have any l | egal or eq | uitable inter | est in any of the follow | ving items? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 6. | | old goods and f | | | hina, kitchenware | | | |
| | □ No | oo. Major applial | iooo, rarriit | are, interio, o | mina, kitorioriwaro | | | |
| | Yes. | Describe | 4 Bada | 4 Drasser | a 2 nightatanda 1 (| Couch, 1 Loveseat, Chair, | 7 | |
| | | | | | ng Table, 6 Chairs a | | | \$750.00 |
| _ | | | | | | | | |
| 7. | • | es: Televisions a | | | stereo, and digital equi lia players, games | pment; computers, printers, scanne | rs; music o | collections; electronic devices |
| | □ No ■ Yes | Describe | | | | | | |
| | — 103. | Describe | 3 Flat S | Screen TVs | , Stereo, Computer, | PS4, and Wii | | \$600.00 |
| 8. | Example ■ No | bles of value es: Antiques and other collecti | | | | oks, pictures, or other art objects; s | tamp, coin | , or baseball card collections; |
| 9. | Example No | ent for sports a es: Sports, photo musical instr | ographic, e | | other hobby equipment; | bicycles, pool tables, golf clubs, ski | is; canoes | and kayaks; carpentry tools; |
| 10 | ■ No | | s, shotgun | s, ammunitio | n, and related equipmer | nt | | |
| | | | | | | | | |
| 11 | □ No | | othes, furs | , leather coat | s, designer wear, shoes | s, accessories | | |
| | ■ Yes. | Describe | Used C | lothing | | |] | \$500.00 |
| 12 | □ No | <i>les:</i> Everyday je | welry, cost | tume jewelry, | engagement rings, wed | lding rings, heirloom jewelry, watche | es, gems, ç | gold, silver |
| | - res. | Describe | Weddir | ng Ring | | | | \$1,200.00 |
| | | | Costun | ne Jewelry | | |] | \$150.00 |

| Debtor 1 | Margie Knig | ht | | Document | Page 12 of ! | Case number <i>(if kno</i> u | vn) |
|--------------|--|------------|-----------------------------|-----------------------|---|------------------------------|---|
| - | farm animals mples: Dogs, cats, | birds, ho | orses | | | | |
| ■ Ye | s. Describe | Dog | | | | | \$300.00 |
| | | 709 | | | | | |
| ■ No | - | | • | d not already list | , including any heal | th aids you did not lis | ıt. |
| — 16 | s. Give specific fill | Omation | | | | | |
| | | | your entries from here | | | es you have attached | \$3,500.00 |
| Part 4: | Describe Your Finance | cial Asset | :s | | | | |
| Do you | own or have any l | egal or e | equitable interest i | in any of the follo | owing? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| ■ No | mples: Money you l | | our wallet, in your h | | | nd when you file your p | etition |
| | institutions. | | | | s of deposit; shares i nstitution, list each. | n credit unions, brokera | age houses, and other similar |
| | S | | | Institution | name: | | |
| | | 17.1. | Checking | Fifth Th | ird Bank | | \$60.00 |
| | | 17.2. | Checking | Fifth Th | ird Bank | | \$99.00 |
| _Exa | | | | orokerage firms, m | oney market accoun | ts | |
| ■ No □ Ye | S | | Institution or issue | er name: | | | |
| and | joint venture | ock and | interests in incor | porated and unin | corporated busines | sses, including an into | erest in an LLC, partnership, |
| ■ No □ Ye | | | about them me of entity: | | | % of ownership: | |
| Neg Non | otiable instruments -negotiable instrum | include | personal checks, ca | ashiers' checks, p | negotiable instrum romissory notes, and he by signing or delive | money orders. | |
| ■ No □ Ye | s. Give specific info | | about them uer name: | | | | |
| | ement or pension mples: Interests in I | | | , 403(b), thrift savi | ngs accounts, or othe | er pension or profit-sha | ring plans |
| | s. List each accour | | tely. of account: | Institution | name: | | |

Case 16-04729 Doc 1 Filed 02/15/16 Entered 02/15/16 17:25:54 Desc Main Document Page 13 of 50 Case number (if known) Debtor 1 Margie Knight 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you □ No Yes. Give specific information about them, including whether you already filed the returns and the tax years...... \$1.761.00 Tax Refund **Federal** 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information.....

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

No

☐ Yes. Give specific information...

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

No

☐ Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

■ No

Case 16-04729 Doc 1 Filed 02/15/16 Entered 02/15/16 17:25:54 Desc Main Document Page 14 of 50 Case number (if known) Debtor 1 Margie Knight ☐ Yes. Give specific information... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$1,920.00 for Part 4. Write that number here..... Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$70,648.00 56. Part 2: Total vehicles, line 5 Part 3: Total personal and household items, line 15 \$3,500.00 Part 4: Total financial assets, line 36 \$1,920.00 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00 62. Total personal property. Add lines 56 through 61... \$5,420.00 Copy personal property total \$5,420.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$76,068.00

Official Form 106A/B

page 5

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Case number (if known) Document

Debtor 1 Margie Knight

Official Form 106A/B Schedule A/B: Property page 6

| | | Docume | T ddc 10 01 30 | |
|---------------------|--------------------------|-------------------|----------------|--|
| Fill in this infor | rmation to identify your | case: | | |
| Debtor 1 | Margie Knight | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption | |
|--|--------------------------------------|---|------------------------------------|--|
| | Copy the value from Schedule A/B | Check only one box for each exemption. | | |
| 4 Beds, 4 Dressers, 2 nightstands, 1 Couch, 1 Loveseat, Chair, Coffee | \$1,500.00 | \$750.00 | 735 ILCS 5/12-1001(b) | |
| Table, Dining Table, 6 Chairs and TV Stand. Line from Schedule A/B: 6.1 | | ☐ 100% of fair market value, up to any applicable statutory limit | | |
| 3 Flat Screen TVs, Stereo, Computer, PS4, and Wii | \$1,200.00 | \$600.00 | 735 ILCS 5/12-1001(b) | |
| Line from Schedule A/B: 7.1 | | ☐ 100% of fair market value, up to any applicable statutory limit | | |
| Used Clothing Line from Schedule A/B: 11.1 | \$500.00 | \$500.00 | 735 ILCS 5/12-1001(a) | |
| Line from Generalie AVE. | | ☐ 100% of fair market value, up to any applicable statutory limit | | |
| Wedding Ring Line from Schedule A/B: 12.1 | \$1,200.00 | \$1,200.00 | 735 ILCS 5/12-1001(b) | |
| Line nom denedate AVD. 12.1 | | ☐ 100% of fair market value, up to any applicable statutory limit | | |
| Costume Jewelry Line from Schedule A/B: 12.2 | \$150.00 | \$100.00 | 735 ILCS 5/12-1001(b) | |
| LINE HOTH SCHEUUIE PVD. 12.2 | | 100% of fair market value, up to any applicable statutory limit | | |

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| Margie Knight | Margie Knight

| | of description of the property and line on the dule A/B that lists this property | Current value of the portion you own | Amo | ount of the exemption you claim | Specific laws that allow exemption |
|------|---|---|---------|---|------------------------------------|
| | | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | |
| | deral: Tax Refund e from Schedule A/B: 28.1 | \$3,522.00 | | \$151.00 | 735 ILCS 5/12-1001(g)(1) |
| | o nom concaule / v.b. ==0. | | | 100% of fair market value, up to any applicable statutory limit | |
| | deral: Tax Refund e from Schedule A/B: 28.1 | \$3,522.00 | | \$1,350.00 | 735 ILCS 5/12-1001(b) |
| LIIR | e IIIIII Schedule A/B. 20.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | e you claiming a homestead exemption bject to adjustment on 4/01/16 and every | | | iled on or after the date of adjustme | ent.) |
| | No | | | | |
| | Yes. Did you acquire the property cover | red by the exemption w | ithin 1 | ,215 days before you filed this case | 9? |
| | □ No | | | | |

Yes

| | | Document | Page 18 | of 50 | | |
|---------------------------------|---|---|-------------------|---|--|--------------------------|
| Fill in this info | rmation to identify yo | our case: | | | | |
| Debtor 1 | Margie Knight | | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | First Name | Middle None | Lost Nome | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States B | ankruptcy Court for the | e: NORTHERN DISTRICT OF ILLI | NOIS | | _ | |
| Case number | | | | | | |
| (if known) | | | | | ☐ Check | if this is an |
| | | | | | amend | led filing |
| ~ | | | | | | |
| Official For | m 106D | | | | | |
| Schedule | D: Creditors | s Who Have Claims S | 3ecured | by Propert | у | 12/15 |
| needed, copy the known). | Additional Page, fill it ou | If two married people are filing together it, number the entries, and attach it to the | | | | |
| 1. Do any creditor | s have claims secured b | y your property? | | | | |
| ☐ No. Ched | ck this box and submit | this form to the court with your other | schedules. Yo | u have nothing else | to report on this form. | |
| Yes. Fill | in all of the information | n below. | | | | |
| Part 1: List | All Secured Claims | | | | | |
| | | more than one secured claim, list the credit | | | Column B | Column C |
| as possible, list the | e claims in alphabetical or | particular claim, list the other creditors in P der according to the creditor's name. | art 2. As much | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| | s Servicing s Fargo Home M | Describe the property that secures th | o claim: | \$84,498.00 | \$70,648.00 | \$13,850.00 |
| Creditor's Nar | | 2981 Bonaventure Circle Uni Palm Harbor, FL 34684 Pine County As of the date you file, the claim is: C | llas | | | |
| | nes, IA 50306 | apply. ☐ Contingent | | | | |
| - | et, City, State & Zip Code | ☐ Unliquidated | | | | |
| , | , | ☐ Disputed | | | | |
| Who owes the d | lebt? Check one. | Nature of lien. Check all that apply. | | | | |
| Debtor 1 only | | An agreement you made (such as m | ortgage or secure | ed | | |
| Debtor 2 only | | car loan) | | | | |
| Debtor 1 and D | • | ☐ Statutory lien (such as tax lien, mech | nanic's lien) | | | |
| ☐ Check if this | the debtors and another | Judgment lien from a lawsuit | Mortgage | | | |
| community d | | Other (including a right to offset) | | | | |
| Date debt was inc | Opened 9/01/06 Last Active 7/01/15 | Last 4 digits of account number | er 9331 | | | |
| Associat | | Describe the property that secures th | e claim: | \$7,795.93 | \$70,648.00 | \$7,795.93 |
| 207 Clearwat | n Parker | 2981 Bonaventure Circle Uni Palm Harbor, FL 34684 Pine County As of the date you file, the claim is: C apply. Contingent Unliquidated | llas | | | |
| Who owes the | laht? Chack and | Disputed | | | | |
| Who owes the d | IENT: CHECK ONE. | Nature of lien. Check all that apply. ☐ An agreement you made (such as m | ortagae or socur | ed | | |
| ■ Debtor 1 only □ Debtor 2 only | | car loan) | origage or secur | eu | | |
| Debtor 1 and D | • | Statutory lien (such as tax lien, mech | nanic's lien) | | | |
| | the debtors and another | Judgment lien from a lawsuit | | | | |

Official Form 106D

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| Debtor | 1 Margie Knight | | | Case | e number (if know) | |
|-------------------------------|---|---|--------------------------|----------------------|--|---------------|
| | First Name | Middle Name | Last Name | _ | | |
| | eck if this claim relates to mmunity debt | a | ding a right to offset) | Association Dues | _ | |
| Date de | ebt was incurred | Last 4 c | ligits of account numb | er 5007 | | |
| Add t | he dollar value of your er | ntries in Column A on this | page. Write that numbe | er here: | \$92,293.93 | |
| | is the last page of your fathat number here: | orm, add the dollar value t | otals from all pages. | | \$92,293.93 | |
| Part 2: | List Others to Be N | otified for a Debt That | You Already Listed | | | |
| to colle credito do not | ect from you for a debt yo | u owe to someone else, list you listed in Part 1, list th | t the creditor in Part 1 | and then list the co | y listed in Part 1. For example, if a collectio ollection agency here. Similarly, if you have ave additional persons to be notified for an | more than one |
| | Bonaventure Comn 4151 Woodlands Pl | | 0 | n which line in | Part 1 did you enter the creditor? | 2.2 |
| | Palm Harbor, FL 34 | - | La | ast 4 digits of a | ccount number | |
| 7 | Name Address | | | | | |
| | Choice Legal Grou <mark>j</mark> P.O. Box 9908 | o PA | 0 | n which line in | Part 1 did you enter the creditor? | 2.1 |
| | Fort Lauderdale, FL | 33310-0908 | La | ast 4 digits of a | ccount number 17Cl | |
| | Name Address | | | | | |
| | HSBC Bank USA Na 1901 W Cypress Cr | | 0 | n which line in | Part 1 did you enter the creditor? | 2.1 |
| | Fort Lauderdale, FL | | La | ast 4 digits of a | ccount number 17Cl | |
| | Name Address | | | | | |
| | Wells Fargo Home 1000 Blue Gentian | 0 0 | 0 | n which line in | Part 1 did you enter the creditor? | 2.1 |
| I | Mac #X7801-02k Eagan, MN 55121 | ι .α. π300 | La | ast 4 digits of a | ccount number | |

| | | | Document | Page | 20 of 50 | | | |
|--------------------------------|--|--|--|------------------------|--|-------------------------------|--------------------------------|------------------------------|
| Fill in | this information to identi | fy your case: | | | | | | |
| Debtor | 1 Margie Kni | ght | | | | | | |
| 5 1. | First Name | Mi | iddle Name | Last Name | _ | | | |
| Debtor (Spouse | | Mi | iddle Name | Last Name | | | | |
| United | States Bankruptcy Court f | or the: NORTI | HERN DISTRICT OF ILLII | NOIS | | | | |
| Casar | number | | | | | | | |
| (if known | | | | | | | Check if this amended fili | |
| | ial Form 106E/F | | | | | | | |
| <u>Sche</u> | edule E/F: Cred | itors Who | Have Unsecure | ed Cla | aims | | | 12/15 |
| Schedul D: Credi he Cont | e G: Executory Contracts an tors Who Have Claims Secutinuation Page to this page. If (if known). | d Unexpired Lease ed by Property. If i f you have no infor | es (Official Form 106G). Do n more space is needed, copy mation to report in a Part, d | ot include the Part | contracts on Schedule A/B: Prope e any creditors with partially secur you need, fill it out, number the ent that Part. On the top of any addition | ed claims the laries in the l | hat are listed boxes on the | in Schedule left. Attach |
| 1. | Do any creditors have priorit | y unsecured claim | s against you? | | | | | |
| | No. Go to Part 2. | | | | | | | |
| Part 2: | ☐ Yes. List All of Your NONE | PRIORITY Unsec | cured Claims | | | | | |
| | Do any creditors have nonpr | | | | | | | |
| | ☐ No. You have nothing to re | • | | vour other | schedules. | | | |
| | ■ Yes. | , | | , | | | | |
| | unsecured claim, list the credit | or separately for ea | ch claim. For each claim listed | d, identify v | who holds each claim. If a creditor what type of claim it is. Do not list clai than three nonpriority unsecured cla | ms already i | ncluded in Pa | art 1. If more on Page of |
| 4.1 | Athletic & Therapeut | ic | Last 4 digits of account | number | 0361 | | \$ | 489.65 |
| | Priority Creditor's Name P.O. Box 371863 Pittsburgh, PA 15250 | 1 | When was the debt incu | ırred? | 2/2016 | _ | | |
| | Number Street City State Zlp | Code | As of the date you file, t | he claim i | s: Check all that apply | | | |
| | Who incurred the debt? Ch | eck one. | ☐ Contingent | | | | | |
| | Debtor 1 only | | _ | | | | | |
| | ☐ Debtor 2 only | | ☐ Unliquidated | | | | | |
| | Debtor 1 and Debtor 2 on | ly | ☐ Disputed | | | | | |
| | At least one of the debtors | | Type of NONPRIORITY | unsecure | I claim: | | | |
| | ☐ Check if this claim is for debt | a community | ☐ Student loans | | | | | |
| | Is the claim subject to offse | et? | ☐ Obligations arising our not report as priority claim | | ration agreement or divorce that you | did | | |
| | ■ No | | Debts to pension or pr | rofit-sharin | g plans, and other similar debts | | | |
| | Yes | | Other. Specify | Collec | etions | | _ | |
| 4.2 | Athletic & Therapeut | ic | Last 4 digits of account | number | 0361 | | \$ | 979.30 |

Priority Creditor's Name

P.O. Box 371863

Pittsburgh, PA 15250 Number Street City State Zlp Code

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

| Debto | r 1 Margie Knight | Document Pa | age 21 of 50 Case number (if know) | | |
|-------|--|--|--|----|--------|
| | Who incurred the debt? Check one. | ☐ Contingent | | | |
| | ■ Debtor 1 only | □ Contingent | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY uns | ecured claim: | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | | |
| | Is the claim subject to offset? | ☐ Obligations arising out of not report as priority claims | a separation agreement or divorce that you did | | |
| | ■ No | ☐ Debts to pension or profit- | sharing plans, and other similar debts | | |
| | Yes | Other. Specify | collections | | |
| 4.3 | Dollar Processing Services | Last 4 digits of account nu | nber 8347 | \$ | 32.31 |
| | Priority Creditor's Name P.O Box 13270 O-5 | When was the debt incurre | | | |
| | Scottsdale, AZ 85267-3270 | When was the dept mount | | | |
| | Number Street City State Zlp Code | As of the date you file, the | claim is: Check all that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | |
| | ■ Debtor 1 only | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY uns | ecured claim: | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | Поли | | | |
| | is the drain subject to offset. | not report as priority claims | a separation agreement or divorce that you did | | |
| | No | ☐ Debts to pension or profit- | sharing plans, and other similar debts | | |
| | ☐ Yes | Other. Specify | collections | | |
| 4.4 | Kaufman Englett & Lynd | Last 4 digits of account nu | nber 6012 | \$ | 600.00 |
| | Priority Creditor's Name | _ | | | |
| | 150 N Orange Ave Suite 100 Orlando, FL 32801 | When was the debt incurred | d? | | |
| | Number Street City State Zlp Code | As of the date you file, the | claim is: Check all that apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | |
| | Debtor 1 only | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY uns | ecured claim: | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans | | | |
| | Is the claim subject to offset? | ☐ Obligations arising out of not report as priority claims | a separation agreement or divorce that you did | | |
| | No | ☐ Debts to pension or profit- | sharing plans, and other similar debts | | |
| | Yes | Other. Specify | collections | | |
| 4.5 | Nationwide Credit & Coll | Last 4 digits of account nu | nber 1854 | \$ | 30.00 |
| | Priority Creditor's Name 815 Commerce Dr Ste 270 | When was the debt incurred | | · | |
| | Oak Brook, IL 60523 Number Street City State Zlp Code | As of the date you file, the | claim is: Check all that apply | | |

Official Form 106 E/F

| (| Case 16-04729 Doc 1 | | | 2/15/16 17:25:5 | 64 Desc Ma | ain |
|--|---|--|------------------|---|----------------------|---------------------|
| Debtor 1 Ma | rgie Knight | Document Page 2 | Case r | OU number (if know) | | |
| Who in | curred the debt? Check one. | ☐ Contingent | | | | |
| Deb | otor 1 only | | | | | |
| ☐ Deb | otor 2 only | ☐ Unliquidated | | | | |
| ☐ Deb | otor 1 and Debtor 2 only | ☐ Disputed | | | | |
| ☐ At I | east one of the debtors and another | Type of NONPRIORITY unsecured | claim: | | | |
| ☐ Che | eck if this claim is for a community | ☐ Student loans | | | | |
| Is the | claim subject to offset? | ☐ Obligations arising out of a separ | ation agre | ement or divorce that you | ı did | |
| ■ No | | not report as priority claims Debts to pension or profit-sharing | ınlans an | d other similar debts | | |
| ■ No | | — O-H | | orney Dupage Med | dical | |
| L res | 5 | Other. Specify Group | uon Att | orney Dupage Med | | |
| . Use this page trying to colle more than on | ect from you for a debt you owe to sor | about your bankruptcy, for a debt that y neone else, list the original creditor in P u listed in Parts 1 or 2, list the additional | arts 1 or 2 | 2, then list the collection | n agency here. Simil | larly, if you have |
| Name Addre | SS | On which entry in Part 1 or P | | | | |
| Athletic & T 4947 Payspl | herapeutic Inst here Circle | | | Creditors with Pri Creditors with No | • | |
| | 60674-4947 | | | | inpriority offsect | JIEU CIAIIIIS |
| | | Last 4 digits of account num | ber 0 | 361 | | |
| Name Addre | | On which entry in Part 1 or P | | | | |
| 4947 Paysp | herapeutic Inst here Circle | | | Creditors with Pri Creditors with No | • | |
| Chicago, IL | 60674-4947 | Last 4 digits of account num | | e. Ordanoro with No | Tipriority Choose | |
| | | _ | | | | |
| Name Addre | ss essing Services | On which entry in Part 1 or P Line 4.3 of (Check one): | | I you list the origir 1: Creditors with Pri | | l Claime |
| P.O. Box 95 | 6649 | | | 2: Creditors with No | • | |
| Saint Louis | , MO 63195-6649 | Last 4 digits of account num | | | | |
| | | | | | | |
| Attn Collect | Credit & Coll ions/Bankruptcy rce Dr Ste 270 | | □ Part ′ | I you list the origin 1: Creditors with Pri 2: Creditors with No | iority Unsecured | |
| Oak Blook, | IL 00323 | Last 4 digits of account num | ber | | | |
| Part 4: Add | d the Amounts for Each Type of | Unsecured Claim | | | | |
| . Total the amo | | aims. This information is for statistical r | eporting p | ourposes only. 28 U.S.C | . §159. Add the amo | ounts for each type |
| | 6a. Domestic support obligation | ns | 6a. | Total claim | 0.00 | |
| Total claims | - | | | · | | |
| from Part 1 | | ots you owe the government all injury while you were intoxicated | 6b. 6c. | \$ | 0.00 | |
| | | nsecured claims. Write that amount here. | 6d. | \$ | 0.00 | |
| | | | | | | |
| | 6e. Total. Add lines 6a through 6 | d. | 6e. | \$ | 0.00 | |
| | Cf Churchent Inner | | C.f | Total Claim | 0.00 | |
| Total claims | 6f. Student loans | | 6f. | \$ | 0.00 | |
| from Part 2 | 6g. Obligations arising out of a did not report as priority cla | separation agreement or divorce that you | ou 6g. | \$ | 0.00 | |
| | | sharing plans, and other similar debts | 6h. | \$ | 0.00 | |

0.00

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Page 23 of 50 Case number (if know) Debtor 1 Margie Knight

> 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 6i. 2,131.26

Total. Add lines 6f through 6i. 2,131.26

| Fill in this infor | mation to identify your | case: | | |
|---------------------|--------------------------|-------------------|-------------|-------|
| Debtor 1 | Margie Knight | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Ch |
| | | | | l ame |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| F | Person or | company with | whom you have th , Street, City, State and ZIF | e contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|---|---------------------|---|
| 2.1 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.2 | | | | | <u></u> |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.3 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.4 | - | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.5 | / | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | <u> </u> |

| | | Docume | ent Page 25 d | of 50 | |
|--------------------|---|---------------------------------------|---------------------------|--|------------------------------------|
| Fill in this | information to identify your | case: | | | |
| Debtor 1 | Margia Knight | | | | |
| Debior 1 | Margie Knight First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing | g) First Name | Middle Name | Last Name | | |
| United State | es Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| | | | | | |
| Case numb | er | | | | Objects to the terms |
| (II KIIOWII) | | | | | Check if this is an amended filing |
| | | | | | amended ming |
| Official | Form 106H | | | | |
| | | -1-4 | | | |
| Scnea | ule H: Your Cod | eptors | | | 12/15 |
| Codebtors a | are people or entities who a | re also liable for any del | ots vou mav have. Be a | as complete and accurate as po | ssible. If two married |
| people are f | filing together, both are equ | ally responsible for sup | plying correct informa | tion. If more space is needed, c | opy the Additional Page, |
| | | | | to this page. On the top of any <i>i</i> | Additional Pages, write |
| your name a | and case number (if known) | . Answer every question | • | | |
| 1. Do y | ou have any codebtors? (If | you are filing a joint case, | do not list either spouse | e as a codebtor. | |
| - | | | | | |
| ■ No | | | | | |
| ☐ Yes | | | | | |
| 2. With | in the last 8 years, have you | lived in a community p | roperty state or territo | ry? (Community property states a | nd territories include |
| Arizona | a, California, Idaho, Louisiana | , Nevada, New Mexico, Pu | erto Rico, Texas, Wash | nington, and Wisconsin.) | |
| ■ N | 0 - 1 - 1 0 | | | | |
| | Go to line 3. | | | | |
| ☐ Yes. | Did your spouse, former spo | use, or legal equivalent liv | e with you at the time? | | |
| | | | | | |
| | | | | r if your spouse is filing with yo | |
| | | | | sure you have listed the credite 06G). Use Schedule D, Schedule | |
| | Column 2. | 11 01111 100 <u>2</u> 71), 01 001100 | iaic o (omoiai i omi i | ood). Ode donedale 2, donedal | b Lit , or concuaic o to |
| | Column 1: Vour andahtar | | | Column 2: The creditor to w | whom you awa the daht |
| | Column 1: Your codebtor ame, Number, Street, City, State and Z | IP Code | | Check all schedules that app | |
| | | | | | • |
| 3.1 | | | | Schedule D, line | |
| N | lame | | | Schedule E/F, line | |
| | | | | ☐ Schedule G, line | |
| N | lumber Street | | | _ | |
| C | City | State | ZIP Code | | |
| | | | | | |
| 3.2 | | | | Schedule D, line | |
| N | lame | | | ☐ Schedule E/F, line | |
| | | | | ☐ Schedule G, line | |
| N | lumber Street | | | _ | |
| C | City | State | ZIP Code | | |

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| Fill in this informa | ation to identify your case: | |
|---------------------------------|---|---|
| Debtor 1 | Margie Knight | |
| Debtor 2 (Spouse, if filing) | | |
| United States Ba | nkruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS | |
| Case number (If known) | | Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date: |
| Official Fo | orm 106I | MM / DD/ YYYY |
| Schedule | e I: Your Income | 12/15 |

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Employment Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. Employed Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation **Respite Worker Parts Supervisor** Include part-time, seasonal, or **Employer's name Access Home Healthcare** Lisle Auto Plaza self-employed work. **Employer's address** Occupation may include student 3501 Algonquin Rd 415 E Ogden Ave or homemaker, if it applies. Rolling Meadows, IL 60008 Clarendon Hills, IL 60514 How long employed there? 2 years 4 years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

- 3. Estimate and list monthly overtime pay.
- 4. Calculate gross Income. Add line 2 + line 3.

| | | | non- | filing spouse |
|----|-----|----------|------|---------------|
| 2. | \$ | 1,408.00 | \$ | 3,837.17 |
| 3. | +\$ | 0.00 | +\$_ | 0.00 |
| 4. | \$ | 1,408.00 | \$_ | 3,837.17 |

For Debtor 2 or

For Debtor 1

Official Form 106I Schedule I: Your Income page 1

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| Deb | otor 1 | Margie Knight | | (| Case i | number (<i>if k</i> | (nown) | | | | | |
|-----|--------------------|--|----------|-----------|-------------|----------------------|--------|------------------|--------|--------------|------------------|------|
| | | | | | For | Debtor 1 | | | Debtor | 2 or | | |
| | Cop | by line 4 here | 4. | | \$ | 1,40 | 8.00 | \$ | | ,837.17 | | |
| 5. | List | all payroll deductions: | | | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 58 | а. | \$ | 16 | 0.52 | \$ | | 639.30 | D | |
| | 5b. | Mandatory contributions for retirement plans | 5b | ٥. | \$ | | 0.00 | \$ | | 0.00 | 0 | |
| | 5c. | Voluntary contributions for retirement plans | 50 | | \$ | | 0.00 | \$ | | 191.88 | | |
| | 5d. | Required repayments of retirement fund loans | 50 | | \$ | | 0.00 | \$ | | 0.00 | | |
| | 5e. 5f. | Insurance | 5€ 5f | | \$_ \$ | | 0.00 | \$ | | 580.67 | | |
| | 5g. | Domestic support obligations Union dues | 5) | | \$ _ | | 0.00 | \$ | | 0.00 | | |
| | 5h. | Other deductions. Specify: | - | ษ. า.+ | \$ _ | | | + \$ | | 0.00 | | |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | _ 6. | | \$ | | 0.52 | \$ | 1 | ,411.8 | | |
| 7. | Cal | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | \$ | | 7.48 | \$ | | ,425.32 | | |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | | | | | _ | |
| | | monthly net income. | 88 | | \$ | | 0.00 | \$ | | 0.00 | | |
| | 8b. | Interest and dividends | 8k | ο. | \$ | | 0.00 | \$ | | 0.00 | 0_ | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 80 | • | \$ | | 0.00 | \$ | | 0.00 | n | |
| | 8d. | Unemployment compensation | 80 | | \$ - | | 0.00 | \$— | | 0.00 | | |
| | 8e. | Social Security | 86 | | \$ - | | 0.00 | \$ | | 0.00 | _ | |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f | | \$ | | 0.00 | \$ | | 0.00 | | |
| | 8g. | Pension or retirement income | 80 | g. า.+ | \$ | | 0.00 | — | | 0.00 | | |
| | 8h. | Other monthly income. Specify: | _ 01 | 1.+ | \$ | | 0.00 | + • — | | 0.00 | <u> </u> | |
| 9. | Add | l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | | | | 0.00 | \$ | | 0.0 | 00 | |
| 10. | Cal | culate monthly income. Add line 7 + line 9. | 10. | \$ | | 1,247.48 | + \$ | 2.4 | 25.32 | = \$ | 3.67 | 2.80 |
| | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | . – | | , | 1 L | | | j L'_ | -, | |
| 11. | Incl othe Do | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify: | dep | | | , , | | • | | le J. +\$ | | 0.00 |
| 12. | | I the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certallies | | | | | | | 12. | \$ | 3,67 | 2.80 |
| 13. | Do | you expect an increase or decrease within the year after you file this form | ? | | | | | | | Comb | ined nly inco | me |
| | | No. | | | | | | | | | | |

Official Form 106I Schedule I: Your Income page 2

| Fill | in this informa | ation to identify ye | our case: | | | | | |
|-------|--|--|--------------------------------------|--|--|--------------------------------------|--|--|
| Deb | tor 1 | Margie Knig | ht | | | Che | ck if this is: | |
| | | | | | | | An amended filing | |
| | tor 2 | | | | | | | wing postpetition chapter |
| (Spc | ouse, if filing) | | | | | | 13 expenses as of | the following date: |
| Unite | ed States Bankr | ruptcy Court for the: | NORTH | HERN DISTRICT OF ILLIN | IOIS | | MM / DD / YYYY | |
| | e numbe r nown) | | | | | | | |
| Of | fficial Fo | rm 106J | | | | | | |
| Sc | chedule | J: Your | Exper | ises | | | | 12/15 |
| Be a | as complete ormation. If m nber (if know | and accurate as | possible eded, atta ry questio | . If two married people a ach another sheet to this | | | | |
| 1. | Is this a join | | illoiu | | | | | |
| | ■ No. Go to | o line 2. | in a sepai | rate household? | | | | |
| | □N | lo | · | | a fan Camanata Hava | ahald of Dal | h.t 0 | |
| | ЦY | es. Deptor 2 mus | st file Offic | ial Form 106J-2, Expense | s for Separate Hous | enola of Del | otor 2. | |
| 2. | Do you hav | e dependents? | ☐ No | | | | | |
| | Do not list D and Debtor 2 | | Yes. | Fill out this information for each dependent | Dependent's relati Debtor 1 or Debtor | | Dependent's age | Does dependent live with you? |
| | Do not state | the | | | | | | □ No |
| | dependents | | | | Son | | 16 | ■ Yes |
| | | | | | | | | □ No |
| | | | | | Son | | 18 | Yes |
| | | | | | | | | □ No |
| | | | | | | | | ☐ Yes |
| | | | | | | | | □ No |
| _ | _ | | | | | | _ | ☐ Yes |
| 3. | expenses o | oenses include f people other t d your depende | han 🦳 | No Yes | | | | |
| exp | imate your ex | a date after the | our bankr | uptcy filing date unless | you are using this f plemental <i>Schedul</i> e | form as a si e <i>J</i> , check t | upplement in a Ch he box at the top o | apter 13 case to report of the form and fill in the |
| the | | h assistance an | | government assistance cluded it on <i>Schedule I:</i> | | | Your exp | enses |
| 4. | | or home owners | | nses for your residence. or lot. | Include first mortgag | je 4. \$ | \$ | 1,300.00 |
| | If not include | ded in line 4: | | | | | | |
| | 4a. Real | estate taxes | | | | 4a. \$ | \$ | 0.00 |
| | 4b. Prope | erty, homeowner's | s, or rente | r's insurance | | 4b. \$ | | 0.00 |
| | 4c. Home | maintenance, re | epair, and | upkeep expenses | | 4c. \$ | | 100.00 |
| | | owner's associat | | | | 4d. § | · | 20.00 |
| 5 | Additional | mortagae navm | ante for w | nur residence, such as ho | me equity loans | 5 9 | | 0.00 |

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| Utilities: 6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other specify: 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments you make to support others who do not live with you. Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedul 20a. Mortgages on other property 20b. Real estate taxes | 6a. 6b. 6c. 6d. 7. 8. 9. 10. 11. | \$ | 312.00 177.00 500.00 0.00 520.00 45.00 |
|--|--|---|---|
| 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance. Specify: Traxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other specify: 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments you make to support others who do not live with you. Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedule 20a. Mortgages on other property | 6b. 6c. 6d. 7. 8. 9. 10. | \$ | 177.00 500.00 0.00 520.00 |
| 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance. Specify: Traxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Other specify: 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). Other payments you make to support others who do not live with you. Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedule 20a. Mortgages on other property | 6c. 6d. 7. 8. 9. 10. | \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | 177.00 500.00 0.00 520.00 |
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| Other payments you make to support others who do not live with you. Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedul 20a. Mortgages on other property | 40 | Φ | 0.00 |
| Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedul 20a. Mortgages on other property | 18. | · | |
| Other real property expenses not included in lines 4 or 5 of this form or on Schedul 20a. Mortgages on other property | | \$ | 0.00 |
| 20a. Mortgages on other property | 19. | _ | |
| | | | |
| 20h Pool octato taxos | 20a. | · | 0.00 |
| | 20b. | · - | 0.00 |
| 20c. Property, homeowner's, or renter's insurance | 20c. | \$ | 0.00 |
| 20d. Maintenance, repair, and upkeep expenses | 20d. | \$ | 0.00 |
| 20e. Homeowner's association or condominium dues | 20e. | \$ | 0.00 |
| . Other: Specify: | 21. | +\$ | 0.00 |
| · · · | | | |
| 2. Calculate your monthly expenses | | | |
| 22a. Add lines 4 through 21. | | \$ | 3,574.00 |
| 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | |
| 22c. Add line 22a and 22b. The result is your monthly expenses. | | \$ | 3,574.00 |
| | | | |
| Calculate your monthly net income. | | | |
| 23a. Copy line 12 (your combined monthly income) from Schedule I. | 23a. | · | 3,672.80 |
| 23b. Copy your monthly expenses from line 22c above. | 23b. | -\$ | 3,574.00 |
| | | | |
| 23c. Subtract your monthly expenses from your monthly income. | 00 | c | 98.80 |
| The result is your monthly net income. | 23c. | \$ | 90.00 |
| Do you expect an increase or decrease in your expenses within the year after you fill For example, do you expect to finish paying for your car loan within the year or do you expect your mortg modification to the terms of your mortgage? No. | | | e or decrease because of a |
| | | | |
| ☐ Yes. Explain here: Debtor drives a vehicle in her husband's name. | | | |

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| Fill in this infor | mation to identify your | casa: | | | |
|--------------------------------------|--|---------------------------|--------------------|---|--|
| Debtor 1 | | case. | | | |
| Deploi | Margie Knight First Name | Middle Name | Last Name | | |
| Debtor 2 | THOCHAMO | Wildale Name | Last Hamo | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | nkruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | | ☐ Check if this is an amended filing |
| | | | | | |
| Official Forn | n 106Dec | | | | |
| Declarat | ion About a | n Individual | Debtor's | Schedules | 12/15 |
| obtaining money years, or both. 1 | | n connection with a bankı | | | ntement, concealing property, or 000, or imprisonment for up to 20 |
| Did you pa | y or agree to pay some | one who is NOT an attorn | ney to help you fi | II out bankruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. N | Name of person | | | Attach <i>Bankruptcy Pet</i> and Signature (Official F | ition Preparer's Notice, Declaration, form 119). |
| | Ity of perjury, I declare true and correct. | that I have read the sumn | mary and schedu | les filed with this declara | tion and |
| X /s/ Mar | gie Knight | | X | | |
| Margie | Knight re of Debtor 1 | | | ture of Debtor 2 | |

Date

Date February 15, 2016

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| Fill in | this inform | nation to identify you | r case: | | | |
|-------------------|-----------------------------|---|--|---|---|---|
| Debtor | 1 | Margie Knight | | | | |
| | | First Name | Middle Name | Last Name | | |
| Debtor (Spouse | | First Name | Middle Name | Last Name | | |
| United | States Bar | kruptcy Court for the: | NORTHERN DISTRICT O | OF ILLINOIS | | |
| Offica | Otates Dai | intupley Court for the. | NORTHERN DIOTRIOT | or illumoid | | |
| Case n | | | | | _ | theck if this is an mended filing |
| | | m 107 of Financial | Affairs for Individ | luals Filing for B | ankruptcy | 12/1: |
| nforma numbe | ation. If me r (if known | ore space is needed,). Answer every que | attach a separate sheet to stion. | this form. On the top of an | equally responsible for sup y additional pages, write yo | |
| Part 1: | | | rital Status and Where You | ı Lived Before | | |
| I. WI | hat is your | current marital statu | is? | | | |
| | Married Not marr | ied | | | | |
| 2. Du | ıring the la | st 3 years, have you | lived anywhere other than | where you live now? | | |
| ■ | No Yes. List | all of the places you | ived in the last 3 years. Do n | ot include where you live nov | ν. | |
| D | ebtor 1 Pri | or Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there |
| | | | | | nity property state or territor ico, Texas, Washington and V | |
| ■ | No Yes. Ma | ke sure you fill out <i>Scl</i> | hedule H: Your Codebtors (O | fficial Form 106H). | | |
| Part 2 | Explair | n the Sources of You | r Income | | | |
| Fill | I in the tota | I amount of income yo | nployment or from operating user income that you received from all jobs and a have income that you receive | all businesses, including part | | ndar years? |
| ■ | No Yes. Fill | in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | of current year until I for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$5,535.20 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |

Official Form 107

Case 16-04729 Doc 1 Filed 02/15/16 Entered 02/15/16 17:25:54 Desc Main Document Page 32 of 50 Case number (if known) Debtor 1 Margie Knight Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$65,464.89 □ Wages, commissions, Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$55,679.00 □ Wages, commissions, Wages, commissions, (January 1 to December 31, 2014) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. ☐ No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Describe below.. (before deductions and Describe below. (before deductions exclusions) and exclusions) For last calendar year: **Rental Income** \$6,400.00 (January 1 to December 31, 2015) For the calendar year before that: **Rental Income** \$9,600.00 (January 1 to December 31, 2014) List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225* or more? □ No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$6,225* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.

Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No.

☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address Dates of payment **Total amount** Amount you Was this payment for ... paid still owe

Case 16-04729 Doc 1 Filed 02/15/16 Entered 02/15/16 17:25:54 Desc Main Document Page 33 of 50 Debtor 1 **Margie Knight** Case number (if known) Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider **Insider's Name and Address Total amount** Amount you Reason for this payment Dates of payment paid still owe Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Reason for this payment Dates of payment Total amount Amount you Include creditor's name paid still owe Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number **HSBC Bank USA National Real Property Circuit Court Pinellas** Pending Association v Margie Knight et al Resedential **County Florida** □ On appeal 2015-008017-CI **Foreclosure** 315 Court St □ Concluded Clearwater, FL 33756 **Bonaventure Community** Civil **Circuit Court Pinellas** Pending Assocaition Inc v Margie Knight et County Florida □ On appeal 315 Court St □ Concluded 2014-004689-CO Clearwater, FL 33756 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. Nο Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Value of the property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

☐ Yes

Official Form 107

Nο

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Case number (if known) Document Debtor 1 Margie Knight

| Pai | t 5: List Certain Gifts and Contribution | s | | | | | | | | |
|-----|---|---------|---|---|---------------------------|--|--|--|--|--|
| 13. | Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No ■ Yes. Fill in the details for each gift. | | | | | | | | | |
| | Gifts with a total value of more than \$60 per person | 00 | Describe the gifts | Dates you gave the gifts | Value | | | | | |
| | Person to Whom You Gave the Gift and Address: | | | | | | | | | |
| 14. | ■ No | | did you give any gifts or contributions with a to | tal value of more than | \$600 to any charity | | | | | |
| | Yes. Fill in the details for each gift or c | | | | | | | | | |
| | Gifts or contributions to charities that t more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code | | Describe what you contributed | Dates you contributed | Value | | | | | |
| Pai | t 6: List Certain Losses | | | | | | | | | |
| 15. | Within 1 year before you filed for bankru disaster, or gambling? No Yes. Fill in the details. | ptcy or | since you filed for bankruptcy, did you lose an | ything because of thef | it, fire, other | | | | | |
| | Describe the property you lost and how the loss occurred | Include | ibe any insurance coverage for the loss ethe amount that insurance has paid. List g insurance claims on line 33 of Schedule A/B: rty. | Date of your loss | Value of property lost | | | | | |
| Pai | t 7: List Certain Payments or Transfers | 5 | | | | | | | | |
| 16. | consulted about seeking bankruptcy or p | orepari | id you or anyone else acting on your behalf pay ng a bankruptcy petition? rs, or credit counseling agencies for services requir | | rty to anyone you | | | | | |
| | | | | | | | | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y | ou′ | Description and value of any property transferred | Date payment or transfer was made | Amount of payment | | | | | |
| | Swanson & Desai, LLC 670 W Hubbard Suite 202 Chicago, IL 60654 Chicago, IL 60654 kc@chicagobankruptcyattorney.com | | \$115.00 Attorney Fees, \$335.00 for filing fee, \$40.00 for credit report, and \$10.00 for copy costs | 2/9/2016 | \$500.00 | | | | | |
| | Access Counseling 633 W 5th Street Suite 26001 Los Angeles, CA 90071 | | \$14.95 for credit counseling | 2/9/2016 | \$14.95 | | | | | |

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Debtor 1 Margie Knight

| 17. | Within 1 year before you filed for bankrupt promised to help you deal with your credit Do not include any payment or transfer that you not include the payment of the payme | ors or to make payment | | | or transfer any prope | rty to anyone who | | | |
|--|--|--|---------------------------|----------------|--|---|--|--|--|
| | Yes. Fill in the details. | | | | | | | | |
| | Person Who Was Paid Address | Description and value transferred | value of any prop | erty | Date payment or transfer was made | Amount of payment | | | |
| 18. | transferred in the ordinary course of your I Include both outright transfers and transfers n | | | | | | | | |
| | Person Who Received Transfer | Description and | value of | Doscribo | any proporty or | Date transfer was | | | |
| | Address | Description and v | | | any property or received or debts change | made | | | |
| | Person's relationship to you | | | | | | | | |
| 19. | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. | | | | | | | | |
| | Name of trust Description and value of the property transferred Date Tr | | | | | | | | |
| | | | | | | made | | | |
| Par | 18: List of Certain Financial Accounts, Ir | nstruments, Safe Deposi | t Boxes, and Sto | rage Units | | | | | |
| 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for y sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit houses, pension funds, cooperatives, associations, and other financial institutions. | | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of accoun instrument | clo mo | te account was sed, sold, oved, or nsferred | Last balance before closing or transfer | | | |
| 21. | Do you now have, or did you have within 1 cash, or other valuables? | year before you filed fo | r bankruptcy, any | / safe deposi | t box or other depos | itory for securities, | | | |
| | ■ No | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, S State and ZIP Code) | | Describe the | contents | Do you still have it? | | | |
| 22. | Have you stored property in a storage unit | • | r home within 1 y | ear before yo | ou filed for bankrupte | су | | | |
| | ■ No □ Yes Fill in the details. | | | | | | | | |
| | | Whe slee has an | had access | Nagarika 4b - | - antonto | De verretill | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or to it? Address (Number, S State and ZIP Code) | | Describe the (| contents | Do you still have it? | | | |
| | | | | | | | | | |

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Debtor 1 Margie Knight

| Par | 19: Identify Property You Hold or Control for | Someone Else | | | | | | |
|-----|---|---|--|-----------------------|--|--|--|--|
| 23. | Do you hold or control any property that some for someone. | one else owns? Include any prope | rty you borrowed from, are storing fo | or, or hold in trust | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the property? (Number, Street, City, State and ZIP Code) | Describe the property | Value | | | | |
| Par | t 10: Give Details About Environmental Inform | nation | | | | | | |
| For | the purpose of Part 10, the following definitions | s apply: | | | | | | |
| | Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these su | air, land, soil, surface water, groun | | | | | | |
| | Site means any location, facility, or property as to own, operate, or utilize it, including disposa | | law, whether you now own, operate, | or utilize it or used | | | | |
| | Hazardous material means anything an environ hazardous material, pollutant, contaminant, or | | s waste, hazardous substance, toxic | substance, | | | | |
| Rep | ort all notices, releases, and proceedings that y | ou know about, regardless of whe | n they occurred. | | | | | |
| 24. | Has any governmental unit notified you that yo | ou may be liable or potentially liable | e under or in violation of an environn | nental law? | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State an ZIP Code) | Environmental law, if you know it | Date of notice | | | | |
| 25. | Have you notified any governmental unit of any | y release of hazardous material? | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State an ZIP Code) | Environmental law, if you know it | Date of notice | | | | |
| 26. | Have you been a party in any judicial or admin | istrative proceeding under any env | rironmental law? Include settlements | and orders. | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case | | | | |
| Par | 11: Give Details About Your Business or Col | nnections to Any Business | | | | | | |
| 27. | Within 4 years before you filed for bankruptcy, | did you own a business or have a | ny of the following connections to ar | ny business? | | | | |
| | ☐ A sole proprietor or self-employed in a | trade, profession, or other activity | , either full-time or part-time | | | | | |
| | ☐ A member of a limited liability compan | y (LLC) or limited liability partnersl | hip (LLP) | | | | | |
| | ☐ A partner in a partnership | | | | | | | |
| | ☐ An officer, director, or managing executive of a corporation | | | | | | | |

 $\hfill\square$ An owner of at least 5% of the voting or equity securities of a corporation

Case 16-04729 Doc 1 Filed 02/15/16 Entered 02/15/16 17:25:54 Page 37 of 50 Document Case number (if known) Debtor 1 Margie Knight No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Margie Knight Signature of Debtor 2 **Margie Knight** Signature of Debtor 1 Date February 15, 2016 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

Official Form 107

☐ Yes

No

☐ Yes. Name of Person

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Revised as of 4/20/2015)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.

- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney

and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.

- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
 - ☑ The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
 - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
 - Services provided by Debtor's counsel in preparation of the petition and costs associated with the filing of the case make it more efficient for Debtor and the Attorney to enter into and advanced payment retainer. Debtor's counsel reserves the right to refuse to enter into a security retainer due to the up-front costs associated with filing a Chapter 13 Bankruptcy. If any portion of the retainer is not considered earned or required for expenses it will be refunded to the client.
 - (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
 - (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
 - (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
 - (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$310.00
- 3. Before signing this agreement, the attorney has received, \$500.00 toward the flat fee, leaving a balance due of \$3,500.00; and \$50.00 for expenses,

leaving a balance due for the filing fee of \$500.00

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: <u>February 11, 2016</u> | The opposite the second of the |
|--|--|
| Signed: | |
| /s/ Margie Knight | /s/ Mehul D. Desai |
| Margie Knight | Mehul D. Desai |
| | Attorney for the Debtor(s) |
| Debtor(s) | |
| Do not sign this agreement if the amou | unts are blank. Local Bankruptcy Form 23c |

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

| In r | re Margie Knight | | Case No. | |
|------|--|---|-------------------------------------|-------------------------------------|
| | | Debtor(s) | Chapter | 13 |
| | DISCLOSURE OF COMP | ENSATION OF ATTOR | RNEY FOR DI | EBTOR(S) |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the f be rendered on behalf of the debtor(s) in contemplation | iling of the petition in bankruptcy, | or agreed to be paid | to me, for services rendered or to |
| | For legal services, I have agreed to accept | | \$ | 4,000.00 |
| | Prior to the filing of this statement I have receive | ed | \$ | 500.00 |
| | Balance Due | | \$ | 3,500.00 |
| 2. | The source of the compensation paid to me was: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 3. | The source of compensation to be paid to me is: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 4. | ■ I have not agreed to share the above-disclosed co | mpensation with any other person | unless they are mem | bers and associates of my law firm. |
| | ☐ I have agreed to share the above-disclosed competopy of the agreement, together with a list of the | | | |
| 5. | In return for the above-disclosed fee, I have agreed to | render legal service for all aspects | s of the bankruptcy o | case, including: |
| | a. Analysis of the debtor's financial situation, and resb. Preparation and filing of any petition, schedules, sc. Representation of the debtor at the meeting of creedd. [Other provisions as needed] | statement of affairs and plan which | may be required; | |
| 6. | By agreement with the debtor(s), the above-disclosed | fee does not include the following | service: | |
| | | CERTIFICATION | | |
| this | I certify that the foregoing is a complete statement of bankruptcy proceeding. | any agreement or arrangement for | payment to me for re | epresentation of the debtor(s) in |
| ١., | February 15, 2016 | /s/ Mehul D. Desa | i | |
| _ | Date | Mehul D. Desai Signature of Attorne Swanson & Desai 670 W Hubbard Suite 202 Chicago, IL 60654 312-666-7882 Fa | y i, LLC i x: 312-666-8894 | om. |

Name of law firm

United States Bankruptcy Court Northern District of Illinois

| In re | Margie Knight | | Case No. | |
|-------|---|--|-------------------|---------------------------|
| | | Debtor(s) | Chapter | 13 |
| | VI | ERIFICATION OF CREDITOR M | MATRIX | |
| | | Number of | f Creditors: | 13 |
| | The above-named Debtor(s (our) knowledge. |) hereby verifies that the list of credi | itors is true and | correct to the best of my |
| | | | | |

Americas Servicing Co/Wells Fargo Home M Po Box 10328 Des Moines, IA 50306

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